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Follow-up to the World Summit for Social Development and the twenty-fourth special session of the General Assembly: priority theme: poverty eradication

Statement submitted by American Cancer Society, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2012/1.

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Statement

Summary

Cancer and other non-communicable diseases, cardiovascular disease, diabetes and chronic respiratory disease, are increasingly acknowledged as a major health and economic development issue, and one of the most significant emerging challenges to poverty eradication. Death and disability from such diseases significantly hinder economic development and are a significant threat to the global economy.

The magnitude of the threat of non-communicable diseases has been recently acknowledged in the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases (General Assembly resolution 66/2, annex), in which the Heads of State and Government noted "with grave concern the vicious cycle whereby non-communicable diseases and their risk factors worsen poverty, while poverty contributes to rising rates of non-communicable diseases, posing a threat to public health and economic and social development". Non-communicable diseases represent a major and growing socio-economic burden on countries of the developing world, placing undue strain on communities and health systems and contributing to poverty.

It is imperative that international development and global health communities take action now to avert the preventable loss of lives and mitigate the expanding social toll and major financial burden of the disease.

We call for:

- The Commission for Social Development, States Members of the United Nations and non-governmental organizations to incorporate and embrace measures to prevent and control non-communicable diseases in recommendations to eradicate poverty
- Governments to implement the commitments made in the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases and to:
  - Promote national plans to fight non-communicable diseases by 2013
  - Increase and prioritize budgetary allocations for addressing non-communicable diseases
  - Develop prevention and control targets and indicators for non-communicable diseases by 2012
  - Explore the provision of adequate, predictable and sustained resources, through domestic, bilateral, regional and multilateral channels, including traditional and voluntary innovative financing mechanisms
- Governments to invest in health care that addresses the burden of non-communicable diseases, encompassing the complete continuum of care ranging from health promotion and disease prevention to the provision of primary health care, acute care treatment, rehabilitation, community care for chronic health problems and palliative care

- The accelerated implementation of the World Health Organization (WHO) Framework Convention on Tobacco Control; tobacco taxation, as well as reducing consumption, can be an important source of revenue for Governments in their fight against non-communicable diseases
- Governments to recognize the unique social, economic and health needs of ageing populations and implement the recommendations of the Madrid International Plan of Action on Ageing, 2002 regarding development and health
- The inclusion of non-communicable diseases within future international development goals, including future Millennium Development Goals.

Cancer and the burden of non-communicable diseases

According to WHO, non-communicable diseases claim more than 36 million lives each year and account for about 63 per cent of all deaths worldwide. Cancer contributes more to the global burden of disease, and to its social and economic costs, than other health concerns currently prioritized by the global health community (for example, HIV/AIDS, malaria and tuberculosis). Furthermore, according to the Global Task Force on Expanded Access to Cancer Care and Control in Developing Countries, cancer and non-communicable diseases are not diseases of affluent nations, in fact they most dramatically affect less developed nations:

- Of the deaths attributable to non-communicable diseases worldwide, 80 per cent are in low and middle-income countries
- Significantly, death and disability from cancer and non-communicable diseases are not restricted to the elderly, but are major causes of death and disability among adults between the ages of 15 and 59. Annually 8.1 million premature deaths from non-communicable diseases occur in low and middle-income countries
- In all regions of the world except Africa, mortality rates are higher for non-communicable diseases than for communicable diseases among men and women between 15 and 59 years of age
- More than 50 per cent of cancer cases and over 70 per cent of all global cancer deaths occur in low and middle-income countries, where cancer claims over 5.3 million lives each year
- According to an article published in *The Lancet* in 2010, the burden of cancer in terms of death and disability is overwhelmingly felt in the developing world — 80 per cent of the disability-adjusted life-years lost to cancer are in low and middle-income countries
- In low-income nations the disease burden created by cancer in adults is higher than other major public health concerns such as malaria, tropical-cluster diseases, nutritional deficiencies and diabetes
- According to WHO, in middle-income nations the disease burden attributed to cancer in adults is higher than that attributed to other major public health concerns, including HIV/AIDS, respiratory diseases, diarrhoeal diseases, tuberculosis, maternal conditions and diabetes

- The inequitable burden of non-communicable diseases on low and middle-income countries will only be exacerbated in the future: the projected expansion of the burden caused by non-communicable diseases will disproportionately affect poor and disadvantaged populations, thereby contributing to widening health gaps between and within countries. Deaths from non-communicable diseases are projected to increase by 17 per cent globally, and by 27 per cent in the African region, in the next 10 years.

Cancer, non-communicable diseases and poverty

Death and disability from cancer and other non-communicable diseases significantly hinder economic development; they represent a major cause of poverty and a major threat to the global economy. The global cancer burden is both a product of and contributor to the overall cycle between poor health and poverty, constituting a major barrier to sustainable economic development.

Given the pronounced disparities between and within nations in access to proven preventative and care options, the social and economic impact and costs disproportionately affect the poorest people in the poorest countries. The cancer burden imposes a substantial social and financial toll on families and communities, which is felt most acutely by the global poor. Inequities in cancer care and outcomes both between and within nations need to be addressed as a human rights imperative as well as an essential component of initiatives to combat poverty and promote sustainable development.

Policies and resources aimed at the development and implementation of evidence-based, resource-appropriate cancer control strategies can reduce the significant social and economic impacts of the disease and play a crucial role in promoting the development of more efficient and sustainable health systems, and can also provide essential support for efforts to address poverty and foster sustainable economic development.

- At the local level, cancer can have a devastating economic impact on families — diminishing household income, impacting un-monetized labour, and/or placing a serious financial burden owing to care and indirect costs — with long-lasting effects on the financial status of families, effects that may ripple through social networks and communities. For many people all over the world, the financial and structural barriers of poverty are insurmountable, preventing them from seeking services or care at an early stage. The costs of cancer can include direct payments and resources used for treatment, care and rehabilitation directly related to the illness and indirect costs resulting from loss of economic output due to days off work and premature death. There are other hidden costs, such as health insurance premiums and non-medical expenses, including transportation, child or elder care, housekeeping assistance, wigs, colostomy supplies and prostheses

- At the aggregate societal level, avoidable cancer-related morbidity and mortality exacts a considerable economic toll through its impact on economic productivity and through the inefficient allocation of scarce health-care resources. According to a study on the "Global economic cost of cancer" by the American Cancer Society and LIVESTRONG, cancer is the disease with the largest global financial impact. The financial impact of death and disability caused by cancer in 2008, not including direct treatment costs, was

$895 billion, the equivalent of 1.5 per cent of the global gross domestic product (GDP). Lung, colorectal and breast cancer account for the largest economic costs, while cancers of the mouth and throat, cervix and breast have the greatest economic impact in low-income countries

- According to recent reports issued by the World Economic Forum, given the projected growth of the burden imposed by non-communicable diseases, if intervention efforts remain static and rates of such diseases continue to increase as populations grow and age, cumulative economic losses in low and middle-income countries over the period from 2011 to 2025 are estimated to surpass $7 trillion (an average of nearly $500 billion per year), which is equivalent to approximately 4 per cent of the current annual output of those countries.

The financial impact of cancer and non-communicable diseases goes beyond financial costs — it actually undermines economic stability. The World Economic Forum recently highlighted chronic diseases as one of the three greatest risks to the global economy, along with fiscal crises and asset price collapse, based on a combination of likelihood and severity. In sum, as asserted in a recent edition of *The Lancet*, "the world faces a huge and largely unperceived cost of inaction around cancer in developing regions, which merits an immediate and large-scale global response".

Policy and resources

Despite the epidemiological and economic significance of the burdens imposed by cancer and other non-communicable diseases in the developing world, and the existence of effective strategies to reduce their incidence, including resultant morbidity and mortality, there are major inequalities between and within nations in access to cancer control resources. At the heart of these serious inequalities is a lack of global political and financial commitment to cancer control.

- Spending on non-communicable diseases, despite the fact that they are responsible for 63 per cent of the world's deaths, is less than 3 per cent of the overall global amount spent on development assistance for health-related problems

- Although more than 50 per cent of cancer cases, and over 70 per cent of cancer deaths and 80 per cent of the disability-adjusted life-years lost to cancer occur in low and middle-income countries, only an estimated 5 per cent of global resources for cancer control are spent there

- Countries in Africa, for example, account for 0.2 per cent of global medical costs for cancer; a little over 1 per cent of global spending on health; 6.4 per cent of new cancer cases; and 15 per cent of the global population.

While the burden of cancer and non-communicable diseases and the costs of inaction are great, many high-impact interventions have been found to be cost effective. The prevention and control interventions recommended by WHO and the Secretary-General of the United Nations can, with a fairly small investment, effectively alleviate the health, social and economic burdens of non-communicable diseases. The millions of premature deaths avoided would lead to reduced economic losses and increased economic output, which would surpass the investment necessary to implement such measures.

- The cost of population-based measures for reducing tobacco use, harmful alcohol use, unhealthy diets and physical inactivity recommended by WHO are estimated to cost $2 billion per year for all low and middle-income countries, a cost of less than $0.40 per person
- The implementation of individual-based "best buy" interventions recommended by WHO (including counselling and drug therapy for cardiovascular disease and cervical cancer screening) would bring the total annual cost to $11.4 billion, a per-person cost of $1 in low-income countries to $3 in upper middle-income countries.